

## **COVID-19 Utility Assistance Program**

The City of Archdale recognizes that COVID-19 has significantly impacted our community. Business closures, restrictions on public gatherings, and the ongoing public health emergency have led to financial hardships for many citizens. In response, the City of Archdale has established a *COVID-19 Utility Assistance Program* to help residential customers pay outstanding utility accounts resulting from the pandemic. Funding for this program comes from the Coronavirus Aid, Relief, and Economic Security Act (CARES Act).

Residents meeting the qualifications listed below are encouraged to apply for assistance. All applications will be reviewed by an internal review team. Relief will be provided based on this team's recommendations until the funds are exhausted. Eligible households will be able to receive assistance in paying the amount currently due to avoid discontinuation of services (up to \$100/month) for four (4) months. This is a needs-based financial assistance program for citizens who have been directly affected by the pandemic (reduced employment opportunities, COVID-19 illness, etc.).

A completed application is not a guarantee of assistance. Funds will be awarded on a first-come, first served basis for eligible applicants. If awarded, funds will be applied directly to the appropriate utility account. The City of Archdale is not responsible if receiving funds from the COVID-19 Utility Assistance Program precludes an individual or household from receiving funds from another source.

## Qualifications

Please ensure that the following qualifications are met before completing an application. If you have any questions about the application or qualifications, please contact us at 336-434-9983 or via email at <a href="mailto:hlunsford@archdale-nc.gov">hlunsford@archdale-nc.gov</a>. Customer Service can also answer questions at 336-434-7341.

- 1) Must live within City of Archdale corporate limits.
- 2) Original due date on the bill for which assistance is requested is between February 20, 2020 and November 20, 2020.
- Applicant has experienced either a reduction of income or an illness directly related to COVID-19.
- 4) Household income on 2019 Tax Return was less than 80% Area Median Income (AMI), as shown in the below table.

## 2020 Income Limits Table

Greensboro-High Point MSA Median Income is \$66,600									
LMI = 80% of AMI based on Family/Household Size									
Persons in family/household	1 Person	2 Persons	3 Persons	4 Persons	5 Persons	6 Persons	7 Persons	8 Persons	
Income Limit(s)	\$37,050	\$42,350	\$47,650	\$52,900	\$57,150	\$61,400	\$65,600	\$69,850	

If you meet these 4 qualifications, you are eligible to complete a *Utility Assistance Program* Application. Applicants will be required to certify that all answers are accurate and complete in order to be eligible for consideration. Assistance is available for the four bills due:

- August 20<sup>th</sup>
- September 20<sup>th</sup>
- October 20<sup>th</sup>
- November 20<sup>th</sup>

Only one application is required in order to be eligible for assistance on each of the four bills. Up to \$100 per bill period will be applied to the approved applicant's utility account. This funding will apply to the current bill AND applicable payment plans dating back to February 20<sup>th</sup>, 2020. If this amount does not cover the entire amount due, customer must pay the difference in order to avoid potential discontinuation of services.

Completed applications should be emailed to <a href="mailto:hlunsford@archdale-nc.gov">hlunsford@archdale-nc.gov</a> or dropped in the drop box in the parking lot at City Hall (307 Balfour Drive).

Other, less recommended options for applying include by fax at 336-431-2131 or by mail to:

City of Archdale c/o COVID-19 Relief P.O. Box 14068 Archdale, NC 27263



## **COVID-19 Utility Assistance Program: Application**

ame	En	Email Address					
ddress							
ty				Zip			
hone	Al	Phone:					
	Number (found on your m						
umber of members in h	ousehold	Please enter th	neir names and in	formation belov			
First Name	Last Name	Relationship	Date of Birth	Last 4 of SS#			
,							
on-profit organizations,	ts or funding for the COVII etc. (other than the feder	al stimulus check)?	☐ Yes	□ No			
If yes, please desc	cribe funds that you have	received and what t	hey were suppos	ed to cover:			

What was your gross income on your 2019 tax return (total of all household members)?
\$
Is your request for assistance related to the COVID-19 pandemic?
If yes, please describe how your ability to pay your Archdale utility bill has been impacted:
Assistance is available for the four (4) utility bills due on August 20 <sup>th</sup> , September 20 <sup>th</sup> , October 20 <sup>th</sup> , and November 20 <sup>th</sup> . Only one application is required in order to be eligible for assistance on each of the four bills. Up to \$100 per bill period will be applied to the approved applicant's utility account. This funding will apply to the current bill AND applicable payment plans dating back to February 20 <sup>th</sup> , 2020. If \$100 does not cover the entire amount due, customer must pay the difference in order to avoid potential discontinuation of services.
Check the box next to each bill that you are seeking assistance for (check as many as you want):
☐ Utility bill due on August 20, 2020
☐ Utility bill due on September 20, 2020
☐ Utility bill due on October 20, 2020
☐ Utility bill due on November 20, 2020
I certify and attest that the information I have provided to determine my eligibility for utility assistance through the City of Archdale (via CARES Act funds) is true and complete to the best of my knowledge. I understand that if the City discovers new information that indicates I am not eligible for the program, my participation can be cancelled. I agree to provide, upon request, documentation on all income sources in order to prove eligibility for assistance under Federal CARES Act regulations. Title 18, Section 1001 of the U.S. Code states that a person is guilty of a felony for knowingly and willingly making a false or fraudulent statement to a department of the United States Government.
I understand that information provided in this application is confidential in regard to my City of Archdale utility account, but that portions may become public record as documentation for federal funding.
I further acknowledge that my eligibility for utility funding assistance is based on having a qualifying annual family income level AND having been negatively impacted by the COVID-19 pandemic. I understand that failure to provide complete and accurate information may be the basis for rejection of my application. My signature below attests that all information provided is accurate to the best of my knowledge.
Print Name of Applicant
Signature of Applicant Date